AMPAIGN DISCLOSURE PT 2009 JAN 20 PM 3: 09

FORM	(Rev. 07/03) DR-3 NOTICE OF DISSOLUTION		
	• Use Only		
Comm. #			
Audited _ Compute Certified	Dete of Dissolution		

Notice of Dissolution

NURSES FOR QUALITY CARE					
Official Name of Committee					
454 PALOMINO PKWY					
Street					
DES MOINES, 10WA 50320					
City, State, Zip Code					
(515) 285-7702					
Area Telephone Code					

Mail to: IECDB 510 East 12th, Suite 1A Des Moines, Iowa 50319

WHEN TO FILE:

The Notice of Dissolution must be filed within thirty (30) days of completion of all the following:

- 1. All debts, loans and obligations have been paid or transferred;
- 2. All campaign funds have been spent;
- 3. All campaign property sold or transferred (candidates only); and
- 4. A final report disclosing all transactions closing the committee.

For state candidates and state PACs, a final bank statement must be filed with the Notice of Dissolution or as soon as possible if the bank statement is not available at the time the Notice of Dissolution is filed.

Signature of Candidate or	Treasurer (if candidate's	committee)/Signature of Chair or	Treasurer (if PAC)
	Date	Signed	

FOR INSTRUCTIONS, SEE BACK OF FORM
This form is not applicable to statutory political committees.